

### **What the Division Preauthorization Nurse will do with the request:**

- (1) Once the Preauthorization nurse receives a request for review, the nurse will compare the clinical information provided by the requesting Health Care Provider to the Division's **Treatment Guidelines**.
- (2) If the clinical information provided meets the Treatment Guideline criteria and the proposed surgery or procedure is medically necessary care related to the accepted workers' compensation injury, the preauthorization nurse will grant approval.
- (3) The case analyst will send a determination regarding preauthorization approval to the injured worker, employer, and Health Care Provider.
- (4) If the clinical information provided with the request does not meet the treatment guidelines and/or the treatment guidelines recommend an automatic physician review, the Division preauthorization nurse will:
  - (a) issue a preauthorization status letter;
  - (a) contact the requesting Health Care Provider for additional information;
  - (b) review the additional information and recommend approval or denial;
  - (c) recommend the injured worker be scheduled for a second opinion, independent medical evaluation, further diagnostic test, or psychological examination;
  - (d) refer the request to a Physician for review;
  - (e) the physician reviewer may contact the requesting Health Care Provider to discuss the case or request additional information;
  - (f) the reviewing physician may recommend the injured worker be evaluated by a specialty consultant;
  - (g) the physician reviewer will make a written recommendation whether to authorize or deny the request.
- (5) If a denial is issued, the claims analyst will send in writing a final determination letter regarding denial of request for preauthorization to the injured worker, employer, and Health Care Provider.
- (6) A preauthorization status letter will be sent to the injured worker and Health Care Provider within a 15 day timeframe as notification the Division received the preauthorization request however there are concerns with the relatedness of the surgery to the injury or that the analyst is still reviewing the injury for acceptance..
- (7) The timeframe for Health Care Providers and injured workers to expect preauthorization approval or denial final determination letter in the event the file was sent for physician review, will vary depending upon the reviewing physician's findings and recommendations. The preauthorization status letter would have been sent within the 15 day time frame as notification the Division received the preauthorization request, however concerns exist or a physician review is pending.